

SACRAMENTO COUNTY PUBLIC LAW LIBRARY
609 9TH ST, SACRAMENTO, CA. 95814
PHONE: (916) 874-8541 FAX: (916) 244-0699

BORROWER INFORMATION:

DATE: _____

LAST NAME: _____ **FIRST NAME:** _____ **M.I.** _____

LAW FIRM/GOV'T AGENCY _____

STREET ADDRESS _____ **STE#** _____ **CITY** _____

STATE _____ **COUNTY** _____ **ZIP CODE** _____

Work Phone: _____ **Alt. Phone #** _____

Email Address: _____

STATE BAR # _____ **CA DRIVER'S LICENSE/I.D. #** _____

SAC. CO. BAR MEMBER Y N

MAILING ADDRESS IF DIFFERENT:

STREET ADDRESS _____ **STE#** _____ **CITY** _____

STATE _____ **COUNTY** _____ **ZIP CODE** _____

PATRON STATUS: WHICH CATEGORY BEST DESCRIBES YOU? (CHECK ONE)

- | | |
|--|---|
| <input type="checkbox"/> JL (Jail Librarian, Assist Clerk) | <input type="checkbox"/> LIBS (Library Staff) |
| <input type="checkbox"/> NRA (Atty-Non-Sacramento County Resident) | <input type="checkbox"/> SRLT (Sac. Resident-Long Term Deposit) |
| <input type="checkbox"/> ATTY (Atty) | <input type="checkbox"/> SIDP (Sac. Resident-Single Item Deposit) |
| <input type="checkbox"/> LIB (Librarian) | <input type="checkbox"/> O (Other) |

Would you like to receive email updates about events, newly added classes, holiday hours, or other exciting information from the Law Library? YES NO

THE UNDERSIGNED PATRON ASSUMES RESPONSIBILITY FOR MATERIALS BORROWED AND FOR ANY CHARGES INCURRED.

SIGNED _____

THE UNDERSIGNED AUTHORIZER ASSUMES RESPONSIBILITY FOR MATERIALS BORROWED AND FOR ANY CHARGES INCURRED BY THE AUTHORIZEE.

SIGNED _____ **PRINT** _____

*****Do Not Complete: Library Use Only*****

Deposit Amount \$ _____ **Staff Initials** _____ **Date** ___/___/___ **Borrower #** _____